

DEPARTMENT OF AGING

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September 19, 2008

Kris Grasty, Director
Kern County Aging and Adult Services
5357 Truxtun Avenue
Bakersfield, California 93309

Dear Ms. Grasty:

Enclosed is the final report issued by the California Department of Aging (CDA), which summarizes the onsite comprehensive assessment of the Kern County Aging and Adult Services Department (AASD), serving Planning and Service Area (PSA) 33. CDA staff conducted the assessment June 9-12, 2008. The purpose of the assessment was to review the Administrative, Fiscal, and Program components of your direct and contracted Title III/VII, Title III E, HICAP, and Community-Based Services Programs (CBSP).

The format of the report contains four specific sections that include: Recap/Overview of Monitoring Visit, Best Practices or Models of Service Delivery, Technical Assistance, and Findings and Corrective Actions.

On August 21, 2008, CDA sent the AASD a Report of Findings and Corrective Actions and a Corrective Action Plan (CAP) in an electronic format requesting AASD, within 30 days, to identify the actions it planned to implement to ensure substantial compliance with all statutory language and program standards that were identified in the CAP. When submitted, CDA will review the CAP and notify the AAA if any additional actions are required or if the CAP is approved as submitted.

We would like to thank you, your staff, the Governing Board Chair, and the Advisory Council Chair for all the assistance and hospitality during our visit. For your convenience we have enclosed two copies of this report. Please provide a copy to your Governing Board Chair and your Advisory Council Chair.

CDA will conduct a comprehensive assessment of your agency again in 2012. In the meantime, please do not hesitate to contact us should you or your staff have questions regarding the administration of programs funded through the Older Americans Act or Older Californians Act.

Sincerely,

Geri Baucom, Coach
Monitoring Protocol Team

Enclosures

cc: Michael J. Rubio, Chair, Board of Supervisors

Jon Johnston, Chair, Commission on Aging

Lynn Daucher, Director
California Department of Aging

Edmond P. Long, Deputy Director
Long-Term Care and Aging Services Division

**KERN COUNTY
AGING AND ADULT SERVICES DEPARTMENT (AASD)
AREA AGENCY ON AGING
PSA 33**

**REPORT OF THE
COMPREHENSIVE ASSESSMENT VISIT**

**Conducted by the
California Department of Aging
June 9-12, 2008**

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- **Recap/Overview of Monitoring Visit**
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The onsite assessment of the Kern County Aging and Adult Services Department (AASD) was conducted by staff of the California Department of Aging (CDA) from June 9-12, 2008. Staff present were Geri Baucom, Acting Policy Manager and Coach, Fiscal and Contracts; Elliott Hochberg, Policy Manager; Denise Crandall, Coach, Health Insurance Counseling and Advocacy Program; and Aging Program Specialists Sandi Hartsock and Tasha Wilson (Administrative); Anthony Perez (Fiscal); Denny Wight (Title III B Supportive Services, Title III B Information and Assistance, and Disaster Preparedness); Barbara Estrada, R.D. (Title III C Elderly Nutrition Program, Title III D Disease Prevention and Health Promotion, and Brown Bag); Joel Weeden (Title III E Family Caregiver Support Program); Kathleen Hendrickson (Linkages, Adult Day Services, and ADCRC), and Ross Kaplan (Health Insurance Counseling and Advocacy Program). CDA staff monitored administrative, fiscal, and specific program standards required by the Older Americans Act (OAA) and Older Californians Act (OCA).

This report includes:

- Recap of the standards monitored during the visit.
- Recognition of best practices or models of service delivery discovered during the monitoring visit that will be shared with the aging network by posting a notice on CDA's website.
- Documentation of the technical assistance on specific program standards provided to the AAA during the monitoring visit.
- Findings and Corrective Actions.

Throughout the report we use either AASD or AAA to refer to Kern County Aging and Adult Services Department. In this report, the two terms are synonymous.

RECAP/OVERVIEW OF MONITORING VISIT

This section provides a recap of the standards monitored during the visit and the recognition of the AASD staff that assisted CDA to accomplish its work.

AAA Administrative Review

Governing Board

The Kern County AASD is the Area Agency on Aging (AAA) for Planning and Service Area (PSA) 33. Kern County is the third largest county in the State. There are five elected members of the Kern County Board of Supervisors, and they serve as the Governing Board for the AASD. The Director of the AASD is appointed by and reports directly to the Kern County Board of Supervisors.

Geri Baucom and Sandi Hartsock met with Juan Cerda, Deputy County Administrative Officer, to determine if the Governing Board, as the policy-making body of the AAA, recognizes and fulfills its roles and responsibilities as required by all regulations, laws, and contracts. The County created a Strategic Plan which includes performance measures for each Department, and AASD produces a mid-year status report for the Board. The Governing Board reviews all contracts, budgets, and area plans. To get items in front of the Board takes approximately two weeks. The Board understands its responsibility to the AAA and the Advisory Council in developing a coordinated community-based system of care and is committed to providing services for seniors and the disabled living within the PSA.

Advisory Council

Geri Baucom and Sandi Hartsock met with Jon Johnston, Chairman, County of Kern Commission on Aging, to determine if the Commission is provided the opportunity to (1) advise the AAA on all matters related to the development and administration of the Area Plan and all operations conducted under the plan, and (2) further the AAA's mission of developing a community-based system of care for older persons living within the PSA. Each Board Supervisor appoints two commissioners and the agencies receiving funding appoint the remainder of the 18 total commissioners that make up the Commission on Aging. In addition, seven Kern County department heads, or their representatives, serve as non-voting members of the Commission providing the opportunity for coordination among Kern County's various departments that provide aging services.

The Commission on Aging meets once a month, ten months a year. Meeting locations are rotated between senior centers throughout the County. Speakers at the meetings have included Board Supervisors, Red Cross Volunteers, Sheriff's Department Representatives, City Managers, and the Chief of Police. In addition to distributing Needs Assessments and conducting the public hearings for the Area Plans, the Commission conducts a Senior Celebration every year to recognize the volunteers in the community. The Commission on Aging works closely with the AASD and the Governing Board and is a strong advocate for seniors in Kern County.

Staffing and Organization

Tasha Wilson met with Susan Spjut, Business Manager, to determine if the AASD has an adequate number of trained staff to administer programs to older individuals living within the PSA. Ms. Wilson reviewed the most recent organizational chart and verified the positions identified on the budgets submitted to CDA matched the AASD's organizational structure. Training is encouraged for every staff member. In addition to County mandated training, staff have the opportunity to take career development classes and attend work related conferences such as C4A. Duty statements and the Personnel Procedures Manual were reviewed and it was determined that personnel practices have been established and are well maintained.

Procurement/Contract Process

Sandi Hartsock met with Susan Spjut, Business Manager, to determine if the AASD has established systematic procedures for the award and administration of contracts in the Area Plan and to ensure the AASD awarded contracts through an open and competitive process. All documentation for this standard was reviewed. The latest RFP was issued in March 2006 for the Family Caregiver Support Program. There were no grievances or appeals filed as a result of the RFP process.

Area Plan Achievement

Tasha Wilson met with Lito Morillo, Program Director, to determine if the AASD has a process for monitoring and tracking the progress of goals and objectives in the current approved Area Plan. Progress on all goals and objectives is monitored, discussed with the Director, and presented to the Commission on Aging and Program Managers at monthly meetings where adjustments are made when necessary. To make a major change during the fiscal year, the AASD has a process in place that involves review by the Director, Governing Board, the Commission on Aging, and the public before submission to CDA.

Targeting/Needs Assessment

Tasha Wilson met with Lito Morillo, Program Director, to ensure the AASD conducts a needs assessment once every four years and targets services to older individuals with the greatest economic or social needs with particular attention to low-income, minority individuals who live within the PSA. A needs assessment was conducted in December 2004. Surveys were available in both English and Spanish. More than 6,000 surveys were distributed and the AASD received 1,393 responses. To ensure targeted individuals were aware of the survey and had the opportunity to respond, surveys were distributed by mail and through community-based service providers. In addition, press releases advertised the survey in four county newspapers and input was sought from key informants. The AASD continues to promote services to targeted populations through outreach efforts to rural areas, participation in health fairs, and wide distribution of senior resource guides and informational brochures.

Community-Based Services

Tasha Wilson met with Lito Morillo, Program Director, and Kathy Shelton, Contracts Administrator, to ensure the AASD proactively provides leadership in the development of a comprehensive and coordinated community-based system of services within the

PSA. The AASD is co-located with county departments such as In-Home Supportive Services (IHSS), Multipurpose Senior Services Program (MSSP), Adult Protective Services (APS), and Public Authority. Department Managers meet monthly ensuring service coordination for seniors living within the PSA. In addition, AAA staff and Commission on Aging members attend community collaborative meetings and participate in coordination efforts of community-based service providers in Kern County. The AASD is well known in the community through active involvement in events such as the Primavera Health Fair, Healthy Harvest Senior Resource Fair, and Senior Day at the Kern County Fair.

Management of Service Providers

Sandi Hartsock met with Kathy Shelton, Contracts Administrator, to determine if the AASD effectively communicates with, disseminates policies to, and monitors its service providers. The AAA disseminates information to service providers by phone, email, and written communication. Ms. Shelton conducts meetings with the service providers every other month. Ms. Shelton uses CDA's website to review new Program Memos and any other information that may be important to the AASD or service providers. Ms. Hartsock reviewed the monitoring schedule and service provider files and found AASD staff conducted annual monitoring. Monitoring reports included findings, recommendations, and timelines for corrective actions; and the AAA documents service provider responses and follow-up. The AASD also tracks the service providers' activity level. If units of service fall below expectations, the AASD begins discussions with the service provider and implements a plan to ensure the service provider maintains appropriate contracted service activity levels.

Data Reporting

Sandi Hartsock met with Susan Spjut, Business Manager, Lito Morrillo, Program Director, and Ron Lemon, Fiscal Officer, to ensure data collection and reporting processes are in place at all levels to ensure timely submission of complete, accurate, and verifiable data. AASD uses the Harmony/SAMS system and submits timely and accurate reports to CDA on a consistent basis. AASD conducts meetings every other month with the service providers, and data training is a part of these meetings. Harmony staff came to California to conduct a training for the AASD staff and service providers. AASD will be converting to a web-based entry database in June 2008.

AAA Fiscal Review

Anthony Perez met with Ron Lemon, Fiscal Officer, Kathy Shelton, Contracts Administrator, and Susan Spjut, Business Manager, to determine if the AAA maintains a financial reporting system that reflects accurate, current, and complete disclosure of the financial activities of the AASD and its service providers. Mr. Perez reviewed each standard of the Fiscal Review tool and examined the service provider contract language for fiscal requirements. Fiscal staff use the County of Kern's Financial Management Systems (FMS) and Excel spreadsheets to track expenditures and revenues reported to CDA. The AAA maintains proper documentation; several reported expenditures were traced back to the originating invoice.

Specific Program Reports—Older Americans Act Programs

Title III B—Supportive Services (General)

Denny Wight met with Kathy Shelton, Contracts Administrator, to review the Title III B Monitoring Tool that was completed prior to the onsite assessment. The major areas discussed included the development of community-based services, program operations, and administrative programmatic procedures. The AAA maintains proper documentation for its Title III B operations.

Mr. Wight also visited the Valley Caregiver Resource Center in Tehachapi, with whom the AAA contracts for the Title III B Homemaker Program. Mr. Wight met with Chris Barrett, Family Consultant, to discuss the operation of the program and review files containing back-up documentation for units of service being reported to the AASD.

Title III B—Case Management (CM)

Title III B Case Management services are provided by Homemaker Services of Indian Wells Valley in Eastern Kern County (Ridgecrest, Inyokern, Johannesburg, Boron, California City, and Rosamond). Kathleen Hendrickson reviewed the monitoring, contract, and RFP for this program. The program was last monitored on April 1, 2008, by Kathy Shelton, Contracts Administrator. Ms. Shelton reviewed four case management charts. Although there were no findings, Ms. Shelton stated in her letter to the agency that there was no consistent organization to the client charts and suggested that all client charts be organized in the same order.

Title III B—Adult Day Care (ADC) Services

Title III B Adult Day Care Services are provided by Homemaker Services of Indian Wells Valley in Ridgecrest. Kathleen Hendrickson reviewed the monitoring, contract, and RFP for this program. The program was last monitored on April 1, 2008, by Kathy Shelton. There has been significant staff turnover for this program including the Administrator. Ms. Shelton requested a copy of the letter the agency sent to Community Care Licensing (CCL) when the change in Administrator occurred and a copy of CCL's response.

Title III B—Information and Assistance (I&A)

Denny Wight conducted a review of the I&A program with the assistance of Lito Morillo, Program Director. AASD provides I&A services directly and through a contract with Homemaker Service of Indian Wells Valley. I&A practices conducted by the AAA were evaluated and the monitoring tool and related documents were reviewed. Inspection of local telephone directories demonstrated that the I&A program is accurately indexed. An I&A staff worker fielding a telephone inquiry demonstrated an above average ability to ascertain the client's needs, answer questions, and provide referral to the needed services. Mr. Wight also attempted to call the 1-800-510-2020 number, both during business and after hours, but was not connected to the local I&A program. I&A training manuals were requested for review. In support of the AAA's attempts to streamline I&A services, Mr. Wight left the AAA with an AIRS package of training documents.

Disaster Preparedness

Denny Wight reviewed the Emergency and Disaster Preparedness Monitoring Tool and the AAA's Emergency and Disaster Preparedness training plans with Kris Grasty, Director. The AAA's disaster plan is modeled after CDA's Disaster Plan. The AASD conducts quarterly safety drills with staff that include training on individual responsibilities in the face of a disaster. The AAA also works closely with OES and is represented on the OES Emergency Planning Committee that meets quarterly.

Title III C—Elderly Nutrition Program (ENP)

An assessment of the ENP was conducted with Jelita Macanas, AAA R.D., Kathryn Shelton, Contracts Administrator, and Lito Morilla, Program Director. Barbara Estrada, R.D., reviewed the AASD Senior Nutrition Program desk manual, donation requests, current ENP menu compliance with Dietary Reference Intakes (DRI), home-delivered meals policies and procedures, annual monitoring reports, eligibility assessments, contracts, quarterly staff training, training evaluations, nutrition education topics and the CDA monitoring tool. Ms. Estrada conducted site monitoring of three ENP service providers. The meal programs monitored provided a representative sample of both direct and contracted services existing in the PSA. Meal service was observed at Richard Prado Senior Center, a direct service provider, and at the City of Delano Senior Center, a contracted service provider. Home-delivered meal pack out was observed at the Shafter Senior Center, a direct service provider.

The AASD provides oversight of three contracted ENP service providers. In July 2007, when one of the contracted ENP service providers could no longer provide senior meals, the AASD assumed the increased responsibility for two additional meal sites.

The AASD organized the direct service nutrition programs under the Program Director, Lito Morillo, and the two food service managers Donna Lannotti and Luanne Jones. This system is a creative business practice that allows the AASD to efficiently provide program oversight and administrative functions over multiple nutrition sites. Ms. Lannotti and Ms. Jones developed a policy and procedure manual that all sites use and perform other administrative functions such as hiring for multiple nutrition sites.

A review of the eligibility assessments at all sites demonstrated that quarterly assessments have not been completed consistently in the past. However, the current files show a marked improvement.

Ms. Estrada and Elliott Hochberg reviewed the City of Delano meal site with Leo Cuevas, Senior Citizens Program Coordinator. This site was an excellent example of how to engage the support of the community at a congregate nutrition site. The City of Delano, along with other community partners, continues to support the activities offered at the center. The seniors were engaged in conversation and activities at the site while waiting for the meal. Mr. Cuevas greeted each person by name and could tell a story about each senior as they came in. He demonstrated a dedication to this program and the senior participants. It was heartwarming to see this vibrantly decorated site and the dedicated staff at work providing more than a meal to the seniors in this community.

Title III D—Disease Prevention and Health Promotion

Barbara Estrada met with Lito Morillo, Program Director, to review the Title III D Disease Prevention and Health Promotion program. Title III D funds are used to provide health information in English and Spanish at two health fairs.

The Medication Management program provides the Senior Health Passport in English and Spanish. The passports provide a place to list medications, physicians' names, and other pertinent information. The convenient pocket sized design of the passports allows seniors to keep this information on them at all times.

Title III E—Family Caregiver Support Program (FCSP)

Joel Weeden appreciated the collaborative support provided by Kathy Shelton, Contracts Administrator. Under her effective stewardship, FCSP is evolving into comprehensive, coordinated, and cost-effective systems of support. Her multifaceted network of FCSP service providers are clearly helping to minimize the negative emotional, physical, and financial consequences of unpaid family caregiving. They have a good understanding of the underlying intent of this newest program to be incorporated into the OAA, and are willing to work together with the AASD to use the Title III E federal funds as a catalyst for generating additional local capacity to address this need.

The AASD and its FCSP service providers took an active role in guiding the CDA onsite assessment. In response to their request, Mr. Weeden conducted an in depth training on FCSP, which included an overview of OAA Amendments of 2006, CDA revisions to the service standards, and data reporting requirements. Individual consultations were conducted with all FCSP service providers. These service provider visits also provided Mr. Weeden an opportunity to observe the AAA's compliance with its FCSP-related oversight and guidance responsibilities. Geographic distances limited the number of onsite visits, but discussions were held at the AASD offices with providers from the Ridgecrest and Tehachapi communities. Ms. Shelton joined Mr. Weeden in all of the following meetings:

- Alzheimer's Disease Association of Kern County – Kate Eucce, Chief Executive Officer; and Gladys Zobel, Director of Family Services.
- Greater Bakersfield Legal Assistance – Danita Melton, Administrator; and Doug Klinchuch, Staff Attorney.
- Around the Clock Foundation – Mary Vasinda, Executive Director; Ann Ray-Bertsch, Linkages Program Manager; and Orlantha Coleman, Caregiver Training and Assistance Program Manager.
- Senior Services of Indian Wells Valley (located in Ridgecrest) – Barry Lowry, Executive Director; and Debbie Taylor, Program Assistant.

- Valley Caregiver Resource Center (located in Tehachapi) – Margery Minney, Executive Director; and Chris Barrett, Kern County Program Coordinator.
- AAA Senior Information and Referral (FCSP direct service) – Lito Morillo, Program Director.

Specific Program Reports—Older Californians Act Programs

Health Insurance Counseling and Advocacy Program (HICAP)

The Kern County HICAP is a direct service of the AASD. The HICAP is integrated and co-located with the Senior I&A as a unit within the Department's Social Programs Division. HICAP counseling sites are also available in towns throughout Kern County including Arvin, Lake Isabella, Ridgecrest, and Wasco. These outlying sites are staffed by HICAP volunteers who make in person counseling appointments as needed.

Ross Kaplan conducted an assessment of the HICAP along with Denise Crandall observing the process. Mr. Kaplan reviewed the HICAP Monitoring Instrument with Yolanda Prado, HICAP Program Manager. The instrument includes a review of eight core elements: management/personnel/operations; recruitment and recognition of volunteers; training; community education; client counseling; legal; marketing/publicity; and performance reporting. Mr. Kaplan also reviewed 25 intake/counseling forms for timeliness of completion, quality of problem summary, and action taken.

Ms. Prado provided supportive documentation whenever requested and responded to all monitoring questions. Lito Morillo, Program Director, supervises the work of the Social Programs unit including I&A, HICAP, and Senior Nutrition. Mr. Morillo made himself available during the HICAP monitoring specifically to address questions pertaining to budget and personnel.

Ms. Prado is assisted on a part time basis by an extra help worker and I&A Program Technicians as available. HICAP volunteers frequently assist in the Bakersfield office as well.

Alzheimer's Day Care Resource Center (ADCRC)

AASD contracts with Alzheimer's Disease Association of Kern County (ADAKC) to provide ADCRC services in Bakersfield. Kathleen Hendrickson reviewed the contract and the most current monitoring of the ADCRC program. The ADCRC program was last monitored on May 12, 2008, by Kathy Shelton, Contracts Administrator.

Ms. Shelton used the County Administrative tool to monitor the program and four findings were noted. All of the findings were resolved with the exception of inaccurate and missing data for the ADCRC. Ms. Shelton continues to work with the site on this issue.

Ms. Hendrickson and Joel Weeden visited the ADAKC with Ms. Shelton. The group was given a tour of the site by Kate Eucce, Chief Executive Officer of ADAKC. ADAKC rents a large multipurpose building from a local church for their ADCRC program. The site has separate areas for activities and the noon meal.

Linkages

Kathleen Hendrickson met with Mary Vasinda, Executive Director of Kern Around the Clock Foundation and Ann Ray-Bertsch, Linkages Program Manager to discuss Linkages services. Kathleen Hendrickson reviewed the RFP, contract, and most current monitoring of the Linkages program. The Linkages program was last monitoring May 19, 2008, by Kathy Shelton, Contracts Administrator. Ms. Shelton used the Linkages Self-Assessment Tool and the AAA's client record form for monitoring.

Ms. Hendrickson, Joel Weeden, and Ms. Shelton conducted a site visit of Kern Around the Clock Foundation. Staff members provided information about the Targeted Case Management (TCM) Program this site has been participating in for several years. The information they provided was very helpful in understanding the requirements of TCM and the very organized and thorough billing process for TCM encounters.

BEST PRACTICES OR MODELS OF SERVICE DELIVERY

Best Practices or Models of Service Delivery discovered during the monitoring of Area Agencies on Aging (AAAs) are being identified by the California Department of Aging (CDA) to share with the aging network and other agencies or individuals interested in developing senior services in their community.

Listed below are either Best Practices or Models of Service Delivery identified during the monitoring visit conducted by CDA and discussed at the Exit Conference. We will place on CDA's website, a list of Best Practices or Models of Service Delivery along with the AAA staff you select to provide guidance to individuals seeking information on specific activities, programs, and services.

Community-Based System of Services

Co-Location of Services Promotes Coordination

The AASD is co-located with county departments such as In-Home Supportive Services (IHSS), Multipurpose Senior Services Program (MSSP), Adult Protective Services (APS), and Public Authority. Department Managers meet monthly ensuring service coordination for seniors living within the PSA. Examples of this coordination include (1) the Healthy Harvest Senior Resource Fair held in the parking lot of the AAA where all departments are represented and public health nurses administer free flu shots and provide health screenings and (2) the MSSP and HICAP dual outreach effort to distribute and collect "HICAP 2008 Health Coverage Information" forms for dual eligible Medicare/Medical beneficiaries.

Family Caregiver Support Program

FCSP Public Information - Coordinated Campaign Strategy

The term "caregiver" is not a new term and is commonly misunderstood when considering whether it is referring to paid or unpaid help. Therefore, it is important for FCSP public information materials to reach out in a way so as to overcome the barrier of FCSP-eligible (unpaid) "caregivers" who do not self-identify as caregivers. Around the Clock Foundation in Bakersfield developed a coordinated public information campaign to ensure FCSP-eligible caregivers are aware of available support. In addition to caregiver-specific information, the FCSP provider incorporated links to unpaid caregiving support throughout its public information sources for "senior" services, including the agency's website and printed brochures.

Alzheimer's Daycare Resource Center (ADCRC)

Nintendo® Wii at ADCRC Site

The Alzheimer's Disease Association of Kern County (ADAKC) in Bakersfield promotes recreational activity by participant use of the Nintendo® Wii. While increasing activity and hand eye coordination, participants are enjoying playing the games such as bowling and also enjoying watching others play the games. The Chief Executive Officer of ADAKC reported that even participants that do not normally engage in activities participate in the Nintendo® Wii games.

HICAP

HICAP/MSSP Joint Outreach Effort

The AASD HICAP Program Manager implemented a joint outreach effort with the Kern MSSP in order to reach Medicare beneficiaries who are also eligible for Medi-Cal. Kern MSSP staff provided “HICAP 2008 Health Coverage Information” forms to MSSP clients and requested that the forms be completed by their family or client. The completed forms were collected by MSSP staff during follow-up visits or mailed back. This resulted in Prescription Drug Plan changes for a majority of MSSP clients and corresponding increases in Part D cases, as well as cost savings for MSSP clients.

TECHNICAL ASSISTANCE

One purpose of the monitoring visit is for CDA staff to provide technical assistance to AAA staff on specific program standards that did not rise to the level of a finding that would require formal corrective action. Detailed below is specific technical assistance provided during the monitoring visit.

Fiscal Review

Monthly Revenue and Expense Report Form

In July 2007, AASD fiscal staff revised the Monthly Revenue and Expense Report form used by service providers to request funds and report expenditures. The form was revised to add a place to report In-kind contributions for Title III B and Title III C. In addition, the Minimum Match calculation for Title III E was removed. Not all service providers are using the revised form. CDA staff suggested that all service providers should be required to use the revised form to ensure fiscal information is accurate.

Staff Timesheets

CDA staff reviewed March 2008 timesheets for six staff reporting time in Administration and Direct Services. One timesheet was signed by the employee but did not contain a supervisor's signature. It was suggested that all timesheets be reviewed to ensure they contain all required signatures.

Title III B – Information and Assistance (I&A)

Information and Assistance

AASD was encouraged to conduct small, random customer satisfaction surveys, at least quarterly. CDA staff suggested the surveys include the following questions:

- (1) How would you rate the service of Information and Assistance staff?
Very Helpful Helpful Fair Poor
- (2) Were you able to access the program(s) you were referred to?
Yes No N/A
- (3) If you needed I&A services again, how likely would you be to call the I&A program?
Very Likely Likely Unsure Unlikely Very Unlikely
- (4) Do you have any additional comments?

CDA staff explained the benefits of using customer satisfaction survey results to demonstrate accomplishments and gain additional resources. AASD could decide the sample size and if they wanted to conduct the survey over the telephone or by mail.

Elderly Nutrition Program (ENP)

Procedure Manual – Handling Donations

A review of the AASD Senior Nutrition Program Desk Manual found that the process for counting donations did not include language that assures correct accounting procedures are used when money is handled. Two people must be present when money is handled

or counted and both signatures should be on the daily cash report to verify the amounts. The manual was edited to include this information prior to the completion of the monitoring trip.

Assessment Record

During the review of quarterly eligibility assessments, CDA staff noted the forms at the Richard Prado Senior Center did not include a place to enter changes to the emergency contact information. Each time the senior is assessed for program eligibility, emergency contact changes should be entered into the assessment record to assure emergency contact information is accurate and up-to-date.

Meal Count Verification

Weekly tally sheets are currently used to verify meal counts. The senior on the home-delivered meal program is required to sign the sheet once a week. While the driver is obtaining a signature from each elderly participant, the remaining meals are held for an increased length of time. An easier and acceptable method is to have the driver sign and date each route sheet verifying the delivery of the meals noted on the sheet.

Menu Guidance

The ENP manual does not include the current menu guidance provided in Program Memo (PM) 07-13(P). The AASD may continue to use the requirements of the manual as they are more restrictive than the guidance set forth in PM 07-13(P). However, the newer guidelines are more cost efficient and may allow the programs to make changes in their menus that will provide cost savings.

Title III E—Family Caregiver Support Program (FCSP)

FCSP Client Record

Kern County Alzheimer's Disease Association utilizes its Adult Day Services intake and assessment forms to document FCSP caregiver eligibility and assessed needs for its range of FCSP services. These forms focus on the Adult Day Services elderly participant as the "client." The FCSP service provider was given guidance on how these forms should be revised to focus on the caregiver and meet FCSP client record expectations.

Title III B and Title III E I&A Distinctions

A call from a senior should not automatically be considered a Title III B service, and a call from a non-senior should not automatically be considered a Title III E Caregiver I&A service. In its direct I&A service program, the AAA should make service distinctions based on the type of need (senior needs help or caregiver needs help) and information provided (senior resources versus caregiver resources).

FCSP Respite Care Provided at Licensed Day Care Facilities

The supervised and protective congregate setting of an Adult Day Care service program can be an excellent resource for the provision of FSCP Temporary Respite Care. However, licensure requirements may hinder the provision of respite care on a timely basis in accordance with OAA expectations. Alzheimer's Disease Association of Kern

County (ADAKC) was advised to contact its local state licensing unit about possible options.

Efficient Use of FCSP Respite Care Funding

The OAA 2006 Amendments call upon AAAs to expand and improve support for unpaid family care through the use of trained volunteers. CDA revised its FCSP Service Matrix to encourage use of volunteers, including in Respite Care. FCSP-funded respite care may also be provided through Senior Companion programs, neighbors, friends and/or other family members hired by a caregiver to provide the needed respite. The AAA should work with its FCSP Respite Care service providers on less costly alternatives for those situations where only short-term care receiver supervision is needed, and not other formal home health agency services.

FCSP Ongoing Support Verses Short-Term Services

Most FCSP-eligible individuals do not recognize themselves as caregivers with needs and do not seek help until there is a crisis. Formidable long-term caregiving challenges mean family caregivers will continuously be at risk or in crisis. Therefore, it is important for a FCSP provider to maintain a supporting partnership with an unpaid caregiver after short-term services have been provided to address a crisis. Around the Clock Foundation should replace its "FCSP Notice of Action: Regarding discontinuance of Services" with a follow-up note that summarizes the current status of FCSP support, acknowledges the continued caregiver responsibilities, and encourages participation in activities (e.g., support groups, training, periodic counseling) that will help prevent the flare-up of any future crises.

FCSP Eligible Matching Funds

AAAs are required to ensure that the federal share of FCSP costs shall not be more than 75 percent. In-kind and cash match contributions count towards satisfying a matching requirement only where the payments would otherwise be allowable costs if Title III E funds were used to pay for the costs. The AASD should discuss with its FCSP service providers their sources of match and ensure the in-kind activities and/or cash contributions meet OAA expectations for FCSP.

Alzheimer's Daycare Resource Center

During the monitoring visit, CDA staff could not locate a current copy of an ADCRC manual. AASD should ensure a copy of the current ADCRC manual is available for all staff. The ADCRC manual is available on the CDA website: www.aging.ca.gov.

Linkages

During the monitoring visit, CDA staff could not locate a current copy of the Linkages manual. AASD should ensure that a copy of the current Linkages manual is available for all staff. The Linkages manual was recently revised and the 2008 revision is available on the CDA website: www.aging.ca.gov.

Incorrect Age Requirement in RFP

In the Community-Based Services Programs (CBSP) RFP, the RFP listed the age requirement as 60 years of age and above. Persons 18 years and older are eligible to receive Linkages and Alzheimer's Day Care Resource Center services. AASD was advised to remove the sentence from Page 1 of the CBSP RFP that lists the age requirement.

FINDINGS AND CORRECTIVE ACTION

This report details the specific findings that led to the corrective actions specified in the Official Notice of Required Corrective Actions presented to the AASD staff at the June 12, 2008, exit conference conducted by the California Department of Aging (CDA). The Report of Findings and Corrective Actions sent to the AAA on August 15, 2008, is incorporated into this final report.

AAA Administrative Review

Advisory Council

California Code of Regulations (CCR) Section 7302(a)(12)(D) states in part that the composition of the Advisory Council should represent the percentage of the Planning and Service Area's (PSA) older population and race and ethnicity for each of the following categories:

1. White
2. Hispanic
3. Black
4. Asian/Pacific Islander
5. Native American/Alaskan Native
6. Other

The county population includes 16.12% Hispanic individuals, while only 5.5% of the Advisory Council members are Hispanic. This leaves the Council with reduced representation on issues that impact Hispanic individuals.

Corrective Action: Recruit Advisory Council members that represent the ethnic composition of the community with particular emphasis on Hispanic individuals.

Procurement/Contract Process

Section I—Request For Proposal (RFP) Process

CCR Section 7354(b)(3) specifies the RFP must include an estimate of the funding available; Section 7354(b)(8) specifies the RFP must include an estimate of the minimum number of units of service to be provided and the definitions of those unit measurements. CDA staff reviewed the AASD's latest Title III E RFP and determined it did not include an estimate of the funding available or minimum number of units of service.

Corrective Action: Ensure RFPs specify an estimate of available funding and minimum service unit performance expectations for each service category to be funded.

CCR Section 7356(b) states in part that the AAA shall promote the widest possible dissemination of information concerning an RFP to elicit adequate competition. At a

minimum, 30 days prior to the deadline for the submission of an RFP, an AAA shall publish a synopsis of the RFP, the deadline for submission, and the AAA's address and telephone number in a local newspaper of general circulation. CDA staff reviewed the AASD's RFP documentation and discovered the RFP was advertised in the local newspaper for only one day. This does not meet the requirements.

Corrective Action: Ensure all RFPs are advertised in the local newspaper for a minimum of 30 days.

Section II—Contract Process

CCR Section 7364(a)(1) states in part that the selected bid/proposal shall become part of the contract between the AAA and the service provider. The AASD's RFP did not specify available funding and minimum service unit performance. Because this error occurred in the RFP, it was repeated in the contract. The AAA may negotiate the final funding and service units with the service provider, but it must be specific in the contract for each funded service category.

Corrective Action: Ensure service provider contracts specify funding levels for each identified service category.

Staffing and Organization

CCR Section 7250(b)(4) requires AAAs to establish written procedures to carry out all of its responsibilities under State and federal regulations and federal law. The AASD does not have desk manuals that contain written procedures for current processes.

Corrective Action: Develop a desk manual for each staff member of the AAA. (Repeat finding, June 2003)

Data Reporting

CDA's Standard Agreement, Exhibit E, Article II(C)(1-5), requires written, program specific reporting procedures. Although the Fiscal Officer has a good understanding of the data system and reports timely, there is no desk manual that contains written data collection and reporting procedures or procedures for ensuring data accuracy.

Corrective Action: Develop and maintain a written data collection/reporting procedures manual.

AAA Fiscal Review

Financial Reporting

45 California Federal Regulations (CFR) Section 92.20(b)(1) specifies that AAAs and service providers must establish and maintain a financial reporting system that reflects accurate, current, and complete disclosure of financial activities. During Fiscal Year (FY) 2007/08, Homemaker Services of Indian Wells Valley submitted Title III B Monthly Revenue and Expense Reports that combined expenditures for Title III B In-Home Respite services and Title III B Adult Day Care services.

Corrective Action: Require Homemaker Services of Indian Wells Valley to submit monthly expenditure reports for Title III B In-Home Respite services separate from Title III B Adult Day Care services.

45 CFR Section 92.20(b)(1) specifies that AAAs and service providers must establish and maintain a financial reporting system that reflects accurate, current, and complete disclosure of financial activities. CDA staff reviewed the Excel spreadsheets used by the Fiscal Officer and determined the budget amounts for Title III E did not agree with the latest approved Area Plan Budget (CDA 122).

Corrective Action: Ensure AASD fiscal records reflect the latest approved budget amounts for Title III E.

45 CFR Section 92.20(b)(1) specifies that AAAs and service providers must establish and maintain a financial reporting system that reflects accurate, current, and complete disclosure of financial activities. The Agreement between the AASD and service providers contains report submission requirements. The Fiscal Officer maintains a detailed log of when monthly reports are received from service providers. CDA staff reviewed the log and determined several reports were submitted late.

Corrective Action: Require all service providers to submit monthly reports by the required due dates.

Internal Control

45 CFR Section 92.20(b)(3) requires AAAs to maintain effective control and accountability for all cash and other assets. CDA staff met with the Fiscal Officer to follow-up on the status of the accounting manual scheduled to be completed by March 31, 2005. The Fiscal Officer's desk duties are documented in an outline form; however, the accounting manual is not complete.

Corrective Action: Develop and maintain a desk manual that contains written procedures for current fiscal processes. (Repeat Finding, June 2003 and April 2000)

Specific Program Reports—Older Americans Act Programs

Title III B—Supportive Services (General)

During a review of the RFP, CDA staff found the Scope of Work for the Title III B Adult Day Care (ADC) program included providing in-home respite for the caregivers of persons attending the ADC. AASD contracted with Homemaker Services of Indian Wells Valley to provide Title III B ADC that included in-home respite services. Although Title III B ADC and Title III B Respite are separate federal programs, the AASD is funding both programs under Title III B ADC. AASD must contract separately for these services.

Corrective Action: Identify separate funding for Title III B Adult Day Care and Title III B In-Home Respite in Section 5, Fiscal Obligations, of the Homemaker Services of Indian Wells Valley service provider contract.

Title III B—Information and Assistance (I&A)

CCR Section 7537(d) requires I&A service providers to record the follow-up and the outcome of referrals for needed services. AASD I&A program staff do not use intake forms to capture the necessary information needed to document outcomes of referrals and follow-ups and other pertinent data as required.

Corrective Action: Develop and implement a standardized intake form that includes name, telephone number, client's age, if they are calling on behalf of a senior, assessment of client's needs, account of I&A provided, outcome of follow-up activity, and unmet needs.

CDA staff discovered I&A program staff are not consistently completing follow-ups and documenting outcomes of referrals when clients are linked to services. Although the AASD conducts some follow-up of its referrals, CCR Section 7537 specifies that I&A providers shall follow-up on each referral to ascertain if the older individual's service needs were met.

Corrective Action: Develop and implement a standardized follow-up procedure to ensure completion of follow-ups and documentation of outcomes for each client that is referred to a needed service, within 30 days of the referral, to ascertain if the individual's service needs were met.

The I&A program does not have a written training plan to ensure staff are aware of their job duties as required in CCR Section 7545 and CCR Section 7547. The training plan should include, at a minimum, the following components:

- Older Americans Act (OAA) and Older Californians Act (OCA);
- Title 22 Regulations pertaining to I&A;
- Role, purpose, and function of the I&A program and the relationship to the administrative structure of the AAA;
- Procedure to identify and access local resources;
- Techniques to obtain vital information from older individuals who require emergency assistance;
- Procedures to handle emergencies such as medical and natural disasters;
- Copy of the NASUA Support Center and Online Guide for Developing Aging Competencies for Information & Referral/Assistance Specialists;
- Procedures on how data related to service provision is tracked, recorded, and reported;
- NAPIS definition of an I&A Service Unit;
- Importance and purpose of completing follow-ups, to the maximum extent practicable, when linking callers to services; and
- Timeline for presentation of the plan/program manual to I&A staff members.

Corrective Action: Develop and implement a written training plan for I&A paid and volunteer staff that includes the elements listed in CCR, Title 22, Section 7547. (Repeat finding, June 2003)

Several attempts were made to contact the AASD I&A Program by calling the 1-800-510-2020 number. Each time, the caller was connected to the San Bernardino County AAA I&A Program. According to Section 7535(b), when I&A services are provided through a telephone answering system, the I&A telephone line shall be available to callers between 8 a.m. and 5 p.m., Monday through Friday.

Corrective Action: Ensure the 1-800-510-2020 I&A toll-free line, when dialed within Kern County, connects callers to the local I&A program.

Title III C—Elderly Nutrition Program (ENP)

CCR Section 7636.5(2)(f) states that documentation of training, to include evaluations and attendance records, shall be maintained, as required in Subsection 7636.7. A review of the training files revealed that staff and volunteer training did not include documentation of training evaluations.

Corrective Action: Ensure all ENP staff and volunteers are provided the opportunity to evaluate training and maintain documentation of the evaluations.

CCR Section 7634.3(d) states that the AAA Registered Dietician (R.D.) will annually monitor each nutrition services provider onsite to evaluate the provision of nutrition services. Not all nutrition services providers in PSA 33 have been monitored this year.

Corrective Action: Ensure all ENP service providers are monitored annually by the AAA R.D.

CCR Section 7638.3(4) states in part that reassessment of need shall be determined quarterly. Of the nine assessments reviewed at the Richard Prado Center, six had recently been reviewed but there was no evidence of consistent completed quarterly eligibility assessments and the forms were not signed or dated.

Corrective Action: Ensure quarterly reassessments for Home-Delivered Meal participants are signed, dated, and included in the client's file.

CCR Section 7638.3(2) states that a written assessment shall be done in the home within two weeks of beginning meal service. The staff at Richard Prado Center has not completed all of the initial assessments on a timely basis.

Corrective Action: Ensure Home-Delivered Meal participants are assessed in their homes within two weeks of beginning meal service.

CCR Section 7634.3(c) states in part that the R.D. shall participate in Area Plan development related to nutrition services. The AASD R.D. has not been able to provide the hours to include this task in her job duties. As the current R.D. decided not to renew her contract, the AASD should ensure the next R.D.'s duty statement and contractual obligation include this task.

Corrective Action: Ensure the AAA R.D. participates in the Area Plan development and Update process on issues relating to the ENP.

CCR Section 7634.3(b) states that the R.D. shall participate in developing and evaluating the AAA RFP concerning nutrition services. The AASD R.D. has not provided input into the RFP process.

Corrective Action: Utilize the expertise of the AAA R.D. when developing the ENP RFP.

45 CFR Section 92.20(b)(2) states in part that AAAs shall maintain records which adequately identify the source and application of funds provided for financially assisted activities. In the AASD service provider contracts, funding for Title III C-1 and Title III C-2 was combined.

Corrective Action: Identify separate funding for Title III C-1 Congregate Nutrition and Title III C-2 Home-Delivered Nutrition in Section 5, Fiscal Obligations, of the service provider contracts.

Title III D—Disease Prevention and Health Promotion

Division 4000 provides a list of allowable units of service for Title III D funds. A review of the Title III D monitoring tool revealed Disease Prevention and Health Promotion funds are used to subsidize the purchase of healthy food for seniors. Purchasing of food is not an allowable use of the Title III D funds.

Corrective Action: Ensure Title III D funds are not used to purchase food.

Title III E—Family Caregiver Support Program (FCSP)

Section 373(c)(2) of the OAA specifies that priority shall be given to four targeted groups [as described in Sections 372(b)(1), 372(b)(2), 373(c)(2)(A), and 373(c)(2)(B)] when providing FCSP services. The AASD's February 2006 RFP for the FCSP asked applicants to address how they would target the caregiving needs of special populations: 75 years of age or older and/or functionally impaired. The list of targeted groups may have been applicable for Title III B services, but did not correspond to the requirements in Title III E of the OAA.

Corrective Action: Ensure the Title III E RFP specifies that FCSP services shall be provided in accordance with additional Title III E priorities, as described in the OAA.

Section 302(1) of the OAA requires that all Title III supportive services (including FCSP) be provided in a manner that facilitates accessibility to, and utilization of, the services provided within the PSA. The OAA Amendments of 2000 called upon AAAs to expand their constituency to be served by helping the many thousands of family members caring for their older loved ones. The AASD website does not include the "family caregiver" when identifying the population it serves, and FCSP is missing from the

directories for Resources, Care Programming, Social Programs, and Senior Information (including FCSP-funded Caregiver Information and Assistance). The website and brochure for Kern County Alzheimer's Disease Association does not clearly identify the availability of FCSP-funded services, or how they may differ from the agency's other service components.

Corrective Action: Require public information, disseminated by Title III E service providers, identifies the available FCSP services and applicable eligibility criteria.

Section 374 of the OAA specifies that FCSP funds are to supplement, and not supplant, the costs of other already existing AAA services and operations. Federal cost principles allow AAAs to spread operating costs between programs and organizations, as long as each program pays its fair share of costs in accordance with the benefits received. The AASD splits its Senior Information and Referral Program operating costs between its Title III E award and other funding sources, including Title III B funds. However, the AASD Human Services Program Director reported that there was currently not an adequate system in place to track performance in association with the different funding sources, and was not able to explain why the agency's cash match was applied only to the Title III B portion of services. The AASD may also be inappropriately classifying all "non-senior" calls as FCSP-eligible caregivers. Resulting performance costs for a unit of caregiver information assistance was seven times greater than a similar service provided to a "senior."

Corrective Action: Ensure the AASD I&A program has a system in place to determine reasonable allocation of costs in accordance with services provided when Title III E program costs are shared with other programs.

Section 315(b)(3) of the OAA prohibits the AAA and its service providers from charging fees or utilizing a cost sharing arrangement for the provision of OAA services because CDA has not established a cost sharing policy. Kern County Alzheimer's Disease Association receives OAA funds for Caregiver Training and Respite Care. According to its website, the "Basics in Caregiving" class has a registration fee of \$40 per person.

Corrective Action: Ensure the Alzheimer's Disease Association replaces client fee practices with opportunities to voluntarily contribute to the service costs when providing Title III E caregiver training.

Section 373(e) of the OAA specifies that the State shall establish standards and mechanisms designed to assure the quality of FCSP-funded services. California specifies quality standards in its FCSP Service Matrix, but has allowed AAAs and their FCSP service providers maximum flexibility in establishing FCSP service delivery procedures. Around the Clock Foundation embedded its FCSP-funded program within its Linkages Case Management program for helping frail, elderly adults and adults with disabilities. Linkages is a highly structured program, with extensive intake, assessment, and care planning procedures. Around the Clock Foundation attempted to adapt these procedures for its FCSP program, but the extensive intake process does not correspond

with an OAA expectation for FCSP assistance to be provided in a timely and responsive manner in order to hold together fragile networks of unpaid caregiver support.

Corrective Action: Work with Around the Clock Foundation to ensure FCSP intake procedures account for caregiver eligibility, caregiving responsibilities, and assessed caregiver needs.

Section 373(c)(1)(B) of the OAA limits the provision of FCSP Respite Care and Supplemental Services to caregivers caring for older adults that meet the condition of “frail.” As specified in Section 102(22)(A)(i) and (B) of the OAA, “frail” means the older care receiver cannot perform at least two Activities of Daily Living (ADLs) or, due to cognitive impairment, requires substantial supervision. Federal ADL categories include eating, toileting, bathing, dressing, and transferring in or out of a bed or chair. This additional OAA restriction ensures effective targeting of limited federal resources to assist with major caregiving burdens. It does not apply to grandparents that are the primary caregiver for a child. Kern County Alzheimer’s Disease Association has a comprehensive array of intake procedures and related tools, but the caregiver and care receiver profile information does not clearly document the status of ADLs.

Corrective Action: Require the Alzheimer’s Disease Association to document in FCSP client records that caregivers receiving respite and supplemental services are caring for older care receivers who meet the definition of “frail.”

Section 315(b)(4) of the OAA requires the AAA to ensure that each of its service providers, when providing clients an opportunity to contribute to the cost of a service, clearly inform the recipient of the service that there is no obligation to contribute and that the contribution is purely voluntary. The FCSP brochure used by Around the Clock Foundation states that “donations are gladly accepted and greatly appreciated.” A client donation request form letter used by Greater Bakersfield Legal Assistance makes a strong plea “to help the poor among us to have access to the judicial system in order to correct injustices which we must all from time to time endure.” In both cases, the donation request is not accompanied with a statement that there is no obligation to contribute.

Corrective Action: Require service providers, when soliciting voluntary contributions, to inform all Title III E caregivers that services will not be denied to anyone who does not contribute to the cost of a service.

Providers of OAA services may request client authorization to release confidential information, but shall not request or encourage the signing of any blanket authorization or release, as specified in CDA’s Standard Agreement, Exhibit D, Article XVIII(C)(6) (and in accordance with applicable federal and State laws). The Confidentiality of Information Act, Section 56.10 of the Civil Code, requires a release to state the specific uses and types of information to be disclosed, the names or functions of those who may release the information and who may receive the information, the date after which information may no longer be released, and the signer’s right to receive a copy of the

signed release. Around the Clock Foundation did not incorporate all of these requirements within its numerous intake forms signed by the client.

Corrective Action: Require Around the Clock Foundation to revise the “Authorization to Release Records” form to identify specific recipients and type of information to be released.

Specific Program Reports—Older Californians Act Programs

Brown Bag Program

AAA’s are required to monitor service providers on an annual basis in accordance with the Brown Bag Program Manual. The last annual onsite monitoring conducted by the AASD was performed in October of 2006. A review has not been completed this year.

Corrective Action: Conduct annual onsite monitoring of the Brown Bag program.

Health Insurance Counseling and Advocacy Program (HICAP)

Program Memo (PM) 99-18(P) requires every local HICAP be staffed with a minimum of a half-time Volunteer Coordinator or Outreach Coordinator. PM 05-14(P) requires local HICAPs to use the \$2 million legislative augmentation to “add non-volunteer, paid staffing to each HICAP’s local infrastructure.” The AASD HICAP does not meet the statewide staffing standards for HICAP as the Volunteer Coordinator position is vacant. Since the June 2003 monitoring visit, a Volunteer Coordinator had been hired but left the program by 2007, and AASD hasn’t filled the position due to a County hiring freeze.

Corrective Action: Fill the Volunteer Coordinator vacancy as soon as possible. (Repeat finding, June 2003)

Alzheimer’s Day Care Resource Center (ADCRC)

CDA staff reviewed the monitoring conducted by the AAA and found that the AASD did not use the required tool to monitor the ADCRC program. The required monitoring tool is the Core Elements tool which can be found in the ADCRC Manual on the CDA website. The requirement to use the Core Elements monitoring tool was established by an agreement between CDA and the California Association of Area Agencies on Aging (C4A).

Corrective Action: Ensure the Core Elements Tool is used to monitor the ADCRC program.

Linkages

CDA staff reviewed the AASD’s monitoring of Kern Around the Clock Foundation completed on May 19, 2008. AAA staff are required to use the Client Chart Review Tool to monitor the Linkages Program per PM 03-17(P). AASD staff used the AAA’s “Client Record Form” to monitor the client charts.

Corrective Action: Ensure the Client Chart Review Tool is used to monitor at least one client chart per care manager during annual monitoring.

CDA staff found one of the care managers at Around the Clock Foundation did not meet the educational requirements included in the Linkages Manual, i.e., “possess a Bachelor’s Degree in Social Work or a related field or possess a Registered Nurse license and have a minimum of one year of experience in a health or social service specialty”. Because the care manager is working toward, but has not completed her degree, Kern Around the Clock Foundation must submit a program flexibility request outlining the care manager’s current educational status and justification for keeping her in the care manager position.

Corrective Action: Ensure Around the Clock Foundation submits a program flexibility request for the care manager who does not have a BA or a BS degree, and then forward to CDA.